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PTO/SB/21 (08-03)

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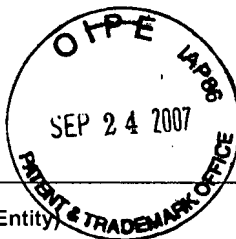
<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)		<b>Application Number</b>	09/997,449
		<b>Filing Date</b>	November 30, 2001
		<b>First Named Inventor</b>	Shamim M. Malik
		<b>Group Art Unit</b>	3731
		<b>Examiner Name</b>	Uyen T. Ho
<b>Total Number of Pages in This Submission</b>	16	<b>Attorney Docket Number</b>	50623.134

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
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<input checked="" type="checkbox"/> Amendment Transmittal Letter (1 page) (in duplicate)	<input type="checkbox"/> Request for Continued Examination Transmittal (RCE)	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Request for Status of Application
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<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Bernard F. Rose, Reg. No. 42,112
Signature	
Date	September 24, 2007

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: September 24, 2007			
Typed or printed name	Rebecca M. Kliits		
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**AMENDMENT TRANSMITTAL LETTER** (Small Entity)

Docket No.

**50623.134**

Applicant(s): Shamim M. Malik et al.

Serial No.

**09/997,449**

Filing Date

**November 30, 2001**

Examiner

**Uyen T. Ho**

Group Art Unit

**3731**

Invention:

A Modified Implantable Device Surface And A Method Of Making The Same

**TO THE COMMISSIONER FOR PATENTS:**

Transmitted herewith is an amendment in the above-identified application.


The fee has been calculated and is transmitted as show below.

**CLAIMS AS AMENDED**

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	24	31	0	X \$25.00	\$00.00
INDEP. CLAIMS	2	3	0	X \$100.00	\$00.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$00.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$00.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. **07-1850** in the amount of \$  
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- ☐ Any additional filing fees required under 37 C.F.R. 1.16.
- ☐ Any patent application processing fees under 37 C.F.R. 1.17.

Dated: September 24, 2007  
Squire, Sanders & Dempsey L.L.P.  
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